A

Please type a plus sign (+) inside this box →	+	
---	---	--

PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

	Patent and Tracemark	Office: 0.9. DEPAR HARM	
nder the Paperwork Reduction Act of 1995, no persons are required to re	<u>espond to a collection of information u</u>	<u>ınless it displays a valid OM</u>	<u>lB control number</u>

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 6741.US.01

First Inventor or Application Identifier Michael Amdahl

Title See 1 in Addendum

(Only for new I	nonprovisional applications under 37 C.F.R. § 1.53(b)) Express	s Mail Label No. EL384170441US
	APPLICATION ELEMENTS hapter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231
	Fee Transmittal Form (e.g., PTO/SB/17)	5. Microfiche Computer Program (Appendix)
	Submit an original and a duplicate for fee processing)	6. Nucleotide and/or Amino Acid Sequence Submission
	pecification [Total Pages 12] referred arrangement set forth below)	(if applicable, all necessary)
	Descriptive title of the Invention	a. Computer Readable Copy
	Cross References to Related Applications Statement Regarding Fed sponsored R & D	b. Paper Copy (identical to computer copy)
	Reference to Microfiche Appendix	c. Statement verifying identity of above copies
- [Background of the Invention	ACCOMPANYING APPLICATION PARTS
	Brief Summary of the Invention	
- [Brief Description of the Drawings (if filed)	7. Assignment Papers (cover sheet & document(s))
	Detailed Description Claim(s)	8 37 C.F.R.§3.73(b) Statement Power of Attorney
	Abstract of the Disclosure	9. English Translation Document (if applicable)
	rawing(s) (35 U.S.C. 113) [Total Sheets]	10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations
4. Oath or	Declaration [Total Pages]	11. Preliminary Amendment
a.	Newly executed (original or copy)	12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
ь. Г	Copy from a prior application (37 C.F.R. § 1.63(d)	* Cmall Entity
o. L	(for continuation/divisional with Box 16 completed)	13. Statement(s) Statement filed in prior application Status still proper and desired
	i. DELETION OF INVENTOR(S) Signed statement attached deleting	(PTO/SB/09-12) Ctatas still proper and desired (PTO/SB/09-12) Ctatas still proper and desired (PTO/SB/09-12)
	inventor(s) named in the prior application,	(if foreign priority is claimed)
	see 37 C.F.R. §§ 1 63(d)(2) and 1.33(b).	15. X Other: Unexecuted Dec & POA (3 pages)
	RITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY ALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT	pas-abganasiapa-bitanasia-bitanasia-bitanasia-bitanasia-bitanasia-bitanasia-bitanasia-bitanasia-bitanasia-bitan
4.4	ED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).	}##***********************************
16. If a CC	ONTINUING APPLICATION, check appropriate box, and sup	oply the requisite information below and in a preliminary amendment:
	Continuation Divisional Continuation-in-part (Cli	P) of prior application No:/
•	pplication information: Examiner	Group / Art Unit;
		f the prior application, from which an oath or declaration is supplied ng continuation or divisional application and is hereby incorporated by
reference. 1	المدور المدر الأمدر الأندو الأدور الأدور الأندو الأندو الأرو الأروا الأروا الأنوا الأروا الأروا الأر	as been inadvertently omitted from the submitted application parts.
	17. CORRESPONDEN	ICE ADDRESS
- -		
Custo	mer Number or Bar Code Labe i (Insert Customer No. or Attaci	or X Correspondence address below h bar code label here)
Name	Steven F. Weinstock	
	Abbott Laboratories	
Address	D-377/ AP6D-2	
	100 Abbott Park Road	
City	Abbott Park State	L Zip Code 60064-6050
Country	Telephone 8	347-937-0042 Fax 847-938-2623
Name	(Print/Type) Gregory W Steele	Registration No. (Attorney/Agent) 33,796
	Gregory W. Blook	
Signatu		Date (0/(7/07

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

+

Attachment to PTO/SB/05 (4/98) Utility Patent Application Transmittal

1. A METHOD OF DETERMINING THE INITIAL DOSE OF VITAMIN D COMPOUNDS

PTO/SB/17 (12/99)
Approved for use through 09/30/2000 OMB 0651-0032
Patent and Trademark Office U S DEPARTMENT OF COMMERCE

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12

See 37 C F R §§ 1 27 and 1 28

WARNING:

TOTAL AMOUNT OF PAYMENT

(\$)950.00

Complete if Known					
Application Number					
Filing Date	October 12, 2001				
First Named Inventor	Michael Amdahl674.				
Examiner Name					
Group / Art Unit					
Attorney Docket No.	6741.US.01				

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
1. X The Commissioner is hereby authorized to charge undicated fees and credit any overnayments to	3. ADDITIONAL FEES			
Indicated fees and credit any overpayments to	Large Entity Small Entity Fee Fee Fee Fee Foo Description	r. p.:1		
Deposit 0.1 0.005	Code (\$) Code (\$)	Fee Paid		
Account Number 01-0025	105 130 205 65 Surcharge - late filing fee or oath	0.00		
Deposit	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	0.00		
Account Name				
	139 130 139 130 Non-English specification	0.00		
Charge Any Additional Fee Required Under 37 CFR §§ 1 16 and 1 17	147 2,520 147 2,520 For filing a request for reexamination	0.00		
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00		
Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00		
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00		
	116 380 216 190 Extension for reply within second month	0.00		
1. BASIC FILING FEE Large Entity Small Entity	117 870 217 435 Extension for reply within third month	0.00		
Fee Fee Fee Fee Description	118 1,360 218 680 Extension for reply within fourth month	0.00		
104 000 004 045 1 White Share San	128 1,850 228 925 Extension for reply within fifth month	0.00		
101 690 201 345 Offlitty filling fee 710.00	119 300 219 150 Notice of Appeal	0 00		
107 480 207 240 Plant filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00		
108 690 208 345 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00		
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00		
CURTOTAL (4) (5) 710 00	140 110 240 55 Petition to revive - unavoidable	0.00		
SUBTOTAL (1) (\$) 710.00	141 1,210 241 605 Petition to revive - unintentional	0.00		
2. EXTRA CLAIM FEES Fee from	142 1,210 242 605 Utility issue fee (or reissue) 143 430 243 215 Design issue fee	0.00		
Extra Claims below Fee Paid	143 430 243 215 Design issue fee 144 580 244 290 Plant issue fee	0.00		
Total Claims 15 -20** = 0 × 18 = 0 Independent 6 - 3** = 3 × 80 = 240	122 130 122 130 Petitions to the Commissioner	0.00		
Independent 6 - 3** = 3 × 80 = 240 Multiple Dependent = 0	100 50 100 50	0.00		
**or number previously paid, if greater, For Reissues, see below	400 040 400 040	0.00		
Large Entity Small Entity	591 40 591 40	0.00		
Fee Fee Fee Fee Description Code (\$) Code (\$)	Recording each patent assignment per property (times number of properties)	0.00		
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection			
102 78 202 39 Independent claims in excess of 3	(37 ČFR § 1 129(a)) 149 690 249 345 For each additional invention to be	0.00		
104 260 204 130 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be examined (37 CFR § 1 129(b))	0.00		
109 78 209 39 ** Reissue independent claims over original patent	Otherfee (specify)	0.00		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00		
SUBTOTAL (2) (\$) 240.00	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.0	00		
SUBMITTED BY Complete (if applicable)				
Registration No. 1				
Gregory VV. Steele				
Signature	Date 10 (し)	5		

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.